

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND				
1 Date of Request: 7/1/84		2 Serial/Patent # 112-772		
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
<input checked="" type="checkbox"/> Filing				\$ 64
	Amendment			\$
	Extension of Time			\$
	Notice of Appeal/Appeal			\$
	Petition			\$
	Issue			\$
	Cert of Correction/Terminal Disc.			\$
	Maintenance			\$
	Assignment			\$
	Other			\$
		7 TOTAL AMOUNT OF REFUND	\$ 64	
8 TO BE REFUNDED BY:				
<input checked="" type="checkbox"/> Overpayment		Treasury Check		
<input type="checkbox"/> Duplicate Payment		Credit Deposit A/C #:	9 12 -- 2475	
10 REASON: No Fee Due (Explanation):				
11 REFUND REQUESTED BY:				
TYPED/PRINTED NAME: Paul Stannack			TITLE: Legal Examiner	
SIGNATURE: Paul Stannack			PHONE: 304-1172	
OFFICE: ***** THIS SPACE RESERVED FOR FINANCE USE ONLY *****				
APPROVED: Paul Stannack			DATE: 7-21-85	

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 1994

Application or Docket Number

480472

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	13 minus 20 =	* 3
INDEPENDENT CLAIMS	6 minus 3 =	* 3
MULTIPLE DEPENDENT CLAIM PRESENT		

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY	OR	OTHER THAN SMALL ENTITY
RATE		RATE
		365.00
x\$11=		
x38=		
+120=		
TOTAL		TOTAL 1024

CLAIMS AS AMENDED - PART II

AMENDMENT A	(Column 1)	(Column 2)	(Column 3)	SMALL ENTITY	OR	OTHER THAN SMALL ENTITY
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
Total	*	Minus	**	=		
Independent	*	Minus	***	=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						

AMENDMENT B	(Column 1)	(Column 2)	(Column 3)	SMALL ENTITY	OR	OTHER THAN SMALL ENTITY
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
Total	*	Minus	**	=		
Independent	*	Minus	***	=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						

AMENDMENT C	(Column 1)	(Column 2)	(Column 3)	SMALL ENTITY	OR	OTHER THAN SMALL ENTITY
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
Total	*	Minus	**	=		
Independent	*	Minus	***	=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	' minus 20 = *	
INDEPENDENT CLAIMS	minus 3 = *	
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY
TYPE

OR
OTHER THAN
SMALL ENTITY

RATE	Fee
BASIC FEE	370.00
X\$ 9=	
X42=	
+140=	
TOTAL	

RATE	Fee
BASIC FEE	740.00
X\$18=	
X84=	
+280=	
TOTAL	

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
			Minus	=
Total	* 171	Minus	** 124	= 47
Independent	* 30	Minus	*** 30	= 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>	

SMALL ENTITY

OR
OTHER THAN
SMALL ENTITY

RATE	ADDI- TIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL ADDT. FEE	

RATE	ADDI- TIONAL FEE
X\$18=	846
X84=	
+280=	
TOTAL ADDT. FEE	

(Column 1) (Column 2) (Column 3)

AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
			Minus	=
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>	

RATE
ADDI-
TIONAL
FEE

RATE
ADDI-
TIONAL
FEE

X\$ 9=	
X42=	
+140=	
TOTAL ADDT. FEE	

X\$18=	
X84=	
+280=	
TOTAL ADDT. FEE	

(Column 1) (Column 2) (Column 3)

AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
			Minus	=
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>	

RATE
ADDI-
TIONAL
FEE

RATE
ADDI-
TIONAL
FEE

X\$ 9=	
X42=	
+140=	
TOTAL ADDT. FEE	

X\$18=	
X84=	
+280=	
TOTAL ADDT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.